

8-1-05

Ifw

Please type a plus sign (+) inside this box → ☐

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

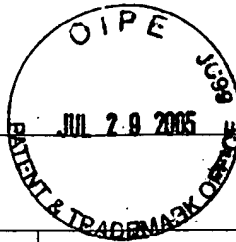
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/630,261	
	Filing Date	July 30, 2003	
	First Named Inventor	Hossainy	
	Group Art Unit	1615	
	Examiner Name	C. S. Rosenthal	
Total Number of Pages in This Submission (excluding references)	31	Attorney Docket Number	50623.276

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Deposit Account 07-1850 Authorization	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Postage Paid Return Postcard	<input type="checkbox"/> Drawing(s) In/Formal ___ Sheets with Submission of Drawings Transmittal	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Response (28 pages)	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input checked="" type="checkbox"/> Amendment Transmittal Letter (in duplicate) (2 pages)	<input type="checkbox"/> Fee Transmittal Form (in duplicate) (2 pgs)	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Petition for Extension of Time (___ months) (in duplicate)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Information Disclosure Statement (in duplicate) with Form PTO-1449 (1 pg) citing 9 References	<input type="checkbox"/> Terminal Disclaimer	
<input checked="" type="checkbox"/> Express Mail Label No. EV 721 152 487 US	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Squire, Sanders & Dempsey L.L.P. Charles E. Ruyman, Ph.D. Reg. No. 43,066
Signature	
Date	July 29, 2005

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service as Express mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date below:			
Typed or printed name	Yayoi Barrack		
Signature		Date	July 29, 2005

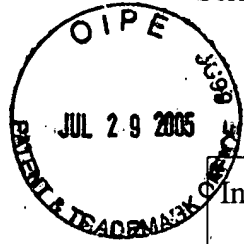


AMENDMENT TRANSMITTAL LETTER (Large Entity)			Docket No. 50623.276		
Applicant(s): Syed F. A. Hossainy et al.					
Serial No. 10/630,261	Filing Date July 30, 2003	Examiner Casey S. Rosenthal		Group Art Unit 1615	
Invention: A Therapeutic Composition And A Method Of Coating Implantable Medical Devices					
TO THE COMMISSIONER FOR PATENTS:					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as show below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	23	23	0	X \$50.00	\$00.00
INDEP. CLAIMS	3	3	0	X \$200.00	\$00.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$00.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$00.00
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p><input checked="" type="checkbox"/> No additional fee is required for amendment.</p> <p><input type="checkbox"/> Please charge Deposit Account No. 07-1850 in the amount of \$ A duplicate copy of this sheet is enclosed.</p> <p><input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge payment of any necessary fees associated with this communication or credit any overpayment to Deposit Account No. 07-1850 A duplicate copy of this sheet is enclosed.</p> <p><input type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.</p> <p><input type="checkbox"/> Any patent application processing fees under 37 C.F.R. 1.17.</p> </div> <div style="width: 45%; text-align: right;"> <p style="font-size: 1.2em; font-family: cursive;">Charles E. Runyan</p> <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/> <p>Charles E. Runyan, Jr. Reg. No. 43,066</p> </div> </div> <p>Dated: <u>July 29, 2005</u> Squire, Sanders & Dempsey L.L.P. 1 Maritime Plaza, Suite 300 San Francisco, CA 94111 (415) 954-0200</p> <p>cc: Docket:</p>					

Serial No. 10/630,261

PATENT

Attorney Docket No.: 50623.00276



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Syed F.A. Hossainy et al.	Examiner: C. S. Rosenthal
Serial No.: 10/630,261	Art Unit: 1615
Filed: July 30, 2003	
Title: Biologically Absorbable Coatings for Implantable Devices and Methods for Fabricating the Same	

Commissioner for Patents
USPTO
P.O. Box 1450
Alexandria, VA 22313-1450

RESPONSE TO OFFICE ACTION

Dear Examiner Rosenthal:

This responds to the Office Action dated April 29, 2005.

Specification amendments begin on page 2.

Claims amendments begin on page 21

Remarks begin on page 25.